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NORFOLK EDUCATION COMMITTEE



Annual Report

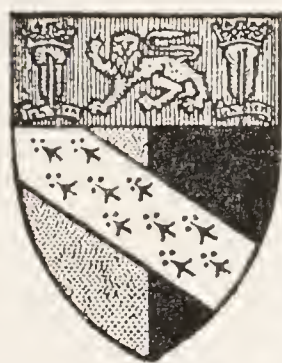
of the

PRINCIPAL

SCHOOL MEDICAL OFFICER

FOR 1968





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PREFACE

I have the honour to present my annual report on the school health service for the year 1968.

During the year, following the resignation of one of the senior medical officers, Dr. A. N. Hunter, who had been concerned with the school health service for a number of years, became responsible for another section of the department and his place was filled by the appointment of Dr. A. S. Lindsay.

It is with deep regret that I report the death of Dr. C. T. Jones, assistant county medical officer and school medical officer in the King's Lynn area since 1st May, 1961.

The number of part-time medical officers increased during the year and without their services the routine school medical inspections would fall further in arrears since the time of the assistant county medical officers and full-time assistants is being taken up more and more each year by special examinations, the need for which tends to be continually increasing.

The number of speech therapists is now at full strength with a resulting increase to 1,005 in the number of children treated.

At 60,652, the school population continues to rise, the increase having been uniform over the last ten years. The number of children examined shows a slight increase over the preceding year but, unfortunately, owing to illness and staff changes there was an increase in the number of schools where routine examination in the three age groups was not completed.

The percentage (12.31) of pupils examined and found to have defects was less than in 1967 and slightly lower than the average figure over the last five years. Only 0.14% of children were reported as having an unsatisfactory general condition, the lowest for five years. These two figures give an indication of the trend towards an improvement in the general health of the school child in Norfolk.

It will be noted from the information supplied by the Chief Education Officer on school milk that as milk is no longer supplied to secondary schools the percentage number of those taking milk in the county fell from 73.91 in 1967 to 56.25 this year.

In the handicapped pupils section of the report, an increase in ascertainment, forty-one over last year, is noted. This increase is mainly in the number of educationally subnormal pupils ascertained. The total number of handicapped pupils on the register, however, remains much the same as in 1967, 852 as compared with 846.

At Eden Hall, asthma continues to be the most common condition, both in the static population and in the new admissions.

A slightly higher percentage of children failed the audiometer testing carried out by health visitors, this being 12% compared with 10.7% in 1967. It is gratifying, however, to note that the number eventually requiring referral to an ear, nose and throat specialist is considerably less this year. There has been a further extension during the year of facilities provided for the education of these children with impaired hearing.

The use of the Keystone vision screener has been extended into all areas and, as was shown in 1967, the initial failure rate in screening is higher than that obtained by other means of testing. Its use, however, is considered to have advantages over those other means.

With regard to immunisation, it is noted that both in diphtheria and poliomyelitis immunisation the number of booster doses remains constant. Measles immunisation was introduced for the first time, 5,000 pupils between the ages of four and fifteen receiving the vaccine.

The success of the school health service in maintaining the health and well-being of the school child at the level shown in this year's report is made possible through the efforts of that service and also through the co-operation of colleagues in the education service and in the various departments of the local authority. To all who have so willingly contributed to the work, cordial thanks are given.

A. G. SCOTT

Health Department
County Hall
Martineau Lane
Norwich, Nor 48A
July, 1969

STAFF OF THE SCHOOL HEALTH SERVICE DURING 1968

Principal School Medical Officer:

A. G. SCOTT, M.B., Ch.B., D.P.H.

Deputy Principal School Medical Officer:

I. C. BRANNEN, M.B., Ch.B., M.R.C.P. D.P.H.

Senior Medical Officers:

A. N. HUNTER, M.B., Ch.B., D.P.H.

M. W. BEAVER, M.B., B.S., D.P.H. (to 30th June)

A. S. LINDSAY, M.B., Ch.B., D.P.H. (from 9th September)

Senior Assistant Medical Officer:

C. H. B. LAWFIELD, M.A., M.R.C.S., L.R.C.P.

School Medical Officers:

(also Assistant County Medical Officers and District Medical Officers of Health)

A. AFNAN, L.A.H., D.P.H. (Eng.), M.D., D.L.O. (Teh.)

J. A. D. BRADFIELD, M.B., B.Ch., B.A.O., D.P.H.

J. McD. HANLEY, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.

G. R. HOLTBY, M.D., D.P.H., D.I.H.

*C. T. JONES, M.R.C.S., L.R.C.P., D.P.H.

LYDIA MCMURDO, M.R.C.S., L.R.C.P., D.P.H.

L. G. POOLE, M.B., Ch.B., D.P.H., D.T.M. & H.

R. D. HARLAND, M.R.C.S., L.R.C.P., D.T.M. & H., D.P.H. (from 1st March)

* Died 7th January, 1969

School Medical Officers :

(also Assistant Medical Officers)

Full-time

SYBIL E. CATOR, M.B., Ch.B.

JUDITH C. R. WARDLE, M.B., B.S., D.Obst.R.C.O.G. (from 23rd September)

KATHERINE B. WORLEY, M.B., Ch.B., D.P.M.

Part-time

MARGARET E. ANDERSON, M.B., Ch.B., M.R.C.O.G. (from 1st July)

CHRISTINE R. COUPLAND, M.B., Ch.B.

G. IVOR DAVIES, M.D., D.P.H.

ELIZABETH M. ELLIOTT, M.B., B.Ch., B.A.O.

MOLLY GOVIER, M.B., Ch.B., D.C.H.

J. HAMILTON, M.B., Ch.B., D.P.H., D.T.M. & H.

A. JEAN LACEY, M.B., Ch.B., D.P.H.

ROSEMARIE D. LINCOLN, M.B., B.S.

MARGARET B. PROSSER, M.B., Ch.B.

MARGARET C. RICHARDS, M.B., B.S.

PAMELA M. HUNTER, M.B., B.S., D.P.H. (from 21st October),

Principal School Dental Officer:

N. J. ROWLAND, L.D.S., R.C.S. (Edin.)

Area Dental Officers:

HILDA M. CROXFORD, L.D.S., R.C.S. (Eng.)

J. L. TAYLOR, L.D.S., R.C.S. (Edin.)

N. H. WHITEHOUSE, B.Ch.D., L.D.S. (to 31st December)

S. H. WOONTON, L.D.S., R.C.S. (Eng.)

Dental Officers:

EDITH P. CHURCHYARD, L.D.S., R.C.S. (Eng.)

IRENE COLLARD, L.D.S.

J. H. DE MIERRE, L.D.S., R.C.S. (Eng.)

J. GEMMELL, L.D.S., R.F.P.S. (Glas.)

J. G. HEYES, B.D.S. (from 4th September)

R. JENNINGS, B.D.S.

P. J. PEARCE, B.D.S.

B. E. PEARSON, B.D.S. (to 26th July)

K. J. PRATT, B.D.S., L.D.S., R.C.S. (Eng.) (to 30th September)

FRANCES J. RHODES, L.D.S., R.C.S. (Eng.) (from 2nd December)

MARGARET WILSON, L.D.S., R.C.S. (Edin.)

*M. G. ANSON, L.D.S., R.C.S. (Eng.) (to 30th September)

*G. N. W. BOOTH, L.D.S., R.C.S. (Eng.)

*ANNE H. NEWMAN, B.Ch.D., L.D.S. (from 1st October)

* Part-time

Superintendent Nursing Officer:

MISS M. WEARMOUTH, S.R.N., S.C.M., H.V.Cert., Q.N.

Deputy Superintendent Nursing Officer:

MISS G. A. THOMPSON, S.R.N., S.R.F.N., S.C.M., H.V.Cert., Q.N.

Assistant Superintendent Nursing Officers:

MISS D. M. BURRELL, S.R.N., S.C.M., H.V.Cert., Q.N.

MISS H. M. H. LONGHURST, S.R.N., S.C.M., H.V.Cert., Q.N. (from 24th March)

MISS D. M. SIMMONS, S.R.N., S.C.M., H.V.Cert., Q.N.

Other Nursing Staff Engaged on School Health Service Duties:

Health Visitors and School Nurses

School nursing duties only, 1; combined duties, 42.

15 District Nurses and Midwives

Combined duties with health visiting and school nursing.

Senior Speech Therapist:

MISS J. RUTT, L.C.S.T.

Speech Therapists:

MRS. D'VIDA BEATON, B.A. (Natal), L.C.S.T.

MISS D. M. BRAITHWAITE, L.C.S.T.

MRS. B. J. EMERY, L.C.S.T.

MRS. E. M. MACDONALD, L.C.S.T. (from 8th January)

19 Driver Attendants (Dental)

ANNUAL REPORT

OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR 1968

I. GENERAL STATISTICS

Area of administrative county 1,301,014 acres

Registrar-General's mid-year estimate of population, 1968 . . 432,890

Number of schools and number of pupils on the registers:

Type of school	Number of schools	Average number of pupils on registers for year
Primary	387	38,679
Secondary modern	45	16,034
Secondary grammar	13	4,969
Wymondham College	1	727
Nursery schools	3	121
Special schools	2	122
	<hr/> 451 <hr/>	<hr/> 60,652 <hr/>

Average attendance of pupils at primary
and secondary modern schools for the year
ended 31st December, 1968:

Primary	91.8%
Secondary modern	90.9%

II. STAFF

The number of staff and whole-time equivalent employed in the school health service as at 31st December, is shown in the following table:

	31st December, 1968		31st December, 1967	
	No. employed	Estimated equivalent in terms of whole- time officers	No. employed	Estimated equivalent in terms of whole- time officers
Medical staff	26	9.70	24	9.04
Dental officers	16	14.63	16	14.63
Speech therapists	5	5.00	4	4.00
School nurses	63	11.21	69	8.30
Driver attendants	19	17.10	19	17.35
Clerk attendants	9	3.01	9	3.10
Totals	138	60.65	141	56.42

III. MEDICAL INSPECTION

Arrangements for periodic medical inspection whereby pupils are examined three times during their school life (viz. at entry, at age ten-plus and on leaving) continued. There was a slight increase (sixty-three) in the number (17,238) of children inspected during the year, the figure for 1967 being 17,175. The numbers of other examinations carried out during the year were re-examinations 8,013 and special examinations at the request of parents, teachers or school nurses 1,092, the comparable figures for 1967 being 9,191 and 1,189 respectively. In addition to the three age groups mentioned above, school nurses also visited schools prior to the date of medical inspection to test the vision of eight-year old pupils in primary schools, and also their hearing in those areas where audiometry sweep testing at six years had not yet been completed. Vision is also screened at thirteen years in grammar schools.

Any child in these two age groups about whose condition the nurse was in doubt was referred to the school medical officer in order that he could arrange to see the child as a "special" at the next medical inspection.

The procedure whereby the Keystone vision screener was used to test vision was extended to all areas by the end of the year. As mentioned in last year's report, the main advantage of these screeners is in the standardisation of light and distance achieved and the small space required so that they can be used in almost any type of accommodation. Statistics regarding testing of these children of eight to thirteen years of age carried out by health visitors are given in the table below:

	Vision screened by vision screener	No. failed referred S.M.O.	Vision screened by other methods	No. failed referred S.M.O.	Hearing tested by audio- meter	No. failed referred S.M.O.	Hearing tested by other methods	No. failed referred S.M.O.
Number of 8-year-old children (Primary schools) . .	1,682	253	1,934	166	228	28	414	6
Number of 13-year-old children (Secondary grammar schools)	41	5	282	25	—	—	—	—

There was a large number (sixty-seven) of schools which did not have a complete medical inspection during 1968, which was the highest for some years. This was mainly due to the introduction of measles vaccination of school children and the prolonged illness of one of the school medical officers.

There was a decrease in the percentage of parents who attended medical inspection, fifty-eight per cent approximately as compared with sixty-four in the previous year.

FINDINGS OF MEDICAL INSPECTION

Diseases and Defects (excluding dental and nutritional defects and uncleanliness)

Table A of Part I of the return sent to the Department of Education and Science, reproduced on page 32, shows that 2,122 individual children were found at periodic medical inspections to have one or more defects considered to need treatment. This, compared with the number of pupils examined, gives a percentage figure of 12.31, a decrease of 0.06 over the corresponding figure for 1967.

The percentages of pupils examined during the past five years and found to have one or more defects were:

1964	..	..	..	..	..	13.18%
1965	..	..	..	..	..	11.81%
1966	..	..	..	..	..	12.33%
1967	..	..	..	..	..	12.37%
1968	..	..	..	..	..	12.31%

General Condition

There was a decrease of 0.11% in the number of pupils whose general condition at medical inspection was considered by the school medical officers as being unsatisfactory. The figures for the period 1964-1968 inclusive are shown below.

It will be noted that the percentage of those pupils found to have unsatisfactory general condition was the lowest for five years and was in fact the lowest since the categories were revised from three to two in 1956.

Year	No. of pupils inspected	Satisfactory		Unsatisfactory	
		No.	%	No.	%
1964	15,150	15,112	99.75	38	0.25
1965	16,306	16,274	99.80	32	0.20
1966	15,309	15,283	99.83	26	0.17
1967	17,175	17,132	99.75	43	0.25
1968	17,238	17,214	99.86	24	0.14

Provision of Milk and Meals

The following table has been compiled from information kindly provided by the Chief Education Officer:

No. of pupils in attendance on 25/9/68			Meals			Milk	
			Free	Paid	%of those attending	1/3rd pint free	%of those attending
Primary	36,614		4,154	26,003	82.36	32,062	87.29
Secondary modern and secondary grammar	20,438		3,160	13,506	81.54	—	—
Nursery	107		6	101	100.00	99	92.52
Totals	1968 57,159 (1967) (54,271)		7,320 (3,384)	39,610 (41,079)	82.10 (81.90)	32,161 (40,112)	56.25 (73.91)

CLEANLINESS

No change was made during the year in the procedure outlined in previous years' annual reports regarding the restricted routine cleanliness inspection of children in primary and secondary modern schools.

During 1968, 24,450 head inspections were carried out by the school nurses and 102 children were found to be verminous. Compared with the previous year, these figures show a greater number of inspections but a considerable drop in the incidence of head infestation.

The trend of infestation over the past five years is given below:

Year	Total No. of examinations made by health visitors/ school nurses	Number of individual children found infested
1964	10,220	159
1965	14,622	199
1966	19,917	324
1967	20,767	209
1968	24,450	102

Where routine head inspection has revealed unsatisfactory conditions, the health visitor follows up those pupils regularly at school until such time as the heads are clean. Home visits are also made when parents are offered advice and issued with a medicated lotion or shampoo.

HEALTH EDUCATION

Many more health education talks were given in schools in the county during 1968 by the health education officer, health visitors, and medical officers.

Programmes of health education were arranged to suit the needs of the individual schools and age range of the students. To give an example of this, a series of eight talks and discussions were arranged for the senior girls at Sprowston Secondary Modern School, the topics comprising personal health, environmental health, human biology, human relationships, mothercraft, accident prevention, and the dangers of smoking. All the talks were illustrated with a variety of visual aids, films, slides and charts. Similar series of talks and discussions were given by health visitors in other schools in the county.

There were many requests for specialised talks and discussions in secondary modern schools, e.g., problems of human relationships, mothercraft, the dangers of smoking, accident prevention and information about services provided by the health department. Some junior schools were visited, and talks were given on personal health and dental care.

SCHOOL LEAVERS—MEDICAL REPORTS

Special attention is given to school leavers by school medical officers in assessing the pupils' capacity for future employment and issuing where appropriate the Ministry of Employment and Productivity Forms Y.9 and Y.10. Where the school leaver had been ascertained and registered as a handicapped pupil, one of the new functional assessment forms (SHS/9) mentioned in previous annual reports is completed and forwarded to the youth employment officer.

TRANSPORT OF CHILDREN TO AND FROM SCHOOL

Arrangements continued for the medical examination of school children who were referred for consideration for the provision of school transport on medical grounds and, during the year, 150 children were, after perusal of the reports by hospital specialists, family doctors or school medical officers, recommended to be provided with transport to and from school.

IV. TREATMENT OF DEFECTS

CO-OPERATION WITH HOSPITALS AND GENERAL PRACTITIONERS

Excellent co-operation exists between school medical officers, hospital consultants and family doctors.

Before any child is referred to a specialist or for hospital treatment, it is the practice, save for certain agreed conditions, to consult the family doctor so that he will have the opportunity, if he wishes, to refer the case himself. In many cases, however, general practitioners are willing for children to be referred by school medical officers, provided they are fully informed of the results.

The routine reports which are available from consultant paediatricians, cardiologists and chest physicians, etc., are very much appreciated and are found most helpful in relating educational needs to physical, mental or emotional defects.

DEFECTIVE VISION

As in previous years, the bulk of defects found at periodic medical inspection were those of vision. During 1968, 1,087 pupils were found to have defects of vision (excluding squint) needing treatment and 1,058 were placed under observation.

Special ophthalmic clinics for school children continued to be held at the Cromer and District, West Norfolk and King's Lynn General, Thetford Cottage and the Jenny Lind Hospitals, by the co-operation of the respective hospital management committees. During the year, 2,049 cases were referred to these clinics and spectacles were prescribed for 997 pupils.

Testing for colour vision continued to be carried out for pupils in the ten/eleven-year-old age groups.

Squint

The number of children found at periodic medical inspection to have squints and referred for treatment during 1968 was 118. There was no change in the number of orthoptic clinics available for Norfolk school children and a summary of the cases seen at each is given below:

Number of children treated by orthoptist	Cromer and District Hospital	Norfolk and Norwich Hospital	West Norfolk and King's Lynn General Hospital	Thetford Cottage Hospital	Total
..	65	*42	161	65	333
Number discharged as improved or cured	23	49	24	11	107

* New cases only. Information regarding other cases not available.

DEFECTS OF EAR, NOSE AND THROAT

138 children were referred at medical inspection for treatment and 847 placed under observation for diseases of the ear, nose and throat.

SKIN DISEASE

During the year, 120 children were referred at medical inspection for treatment and 300 placed under observation for diseases of the skin.

ORTHOPAEDIC DEFECTS

The arrangements whereby children needing orthopaedic treatment were referred, with the consent of the family doctors, to the orthopaedic surgeons at Norfolk hospitals, continued during the year.

V. DENTAL TREATMENT

The Principal School Dental Officer reports:

Staff

The overall staffing situation remained static except for the equivalent loss of one dental officer for four months which arose as new staff took up their appointments.

The whole-time equivalent was fifteen officers consisting of fourteen whole-time and two part-time officers. Dental driver/attendants numbered nineteen, three of whom were part-time. The same staff also provided maternity and pre-school dental services in addition to their school dental service work. It is encouraging to see more young dental surgeons entering local authority service. In 1963 the average age of our dental officers was forty-six years, in 1966, forty-eight years, but in 1968 it had dropped to forty-three years.

Mr. N. H. Whitehouse was appointed Chief Dental Officer to the City of Nottingham and we congratulate him on this senior appointment which was the first of its kind from our staff for many years. He left at the end of the year but I am pleased to report that his successor as area dental officer, Swaffham, is due to commence duty early in 1969.

Mr. K. J. Pratt also received promotion on joining the City of Leicester as an area dental officer in October. Miss F. J. Rhodes succeeded Mr. Pratt in the Diss/Long Stratton district in December.

In June, Mr. B. E. Pearson left the King's Lynn district to enter practice. The vacancy was filled by Mr. J. Heyes two months later.

The other change involved the retirement of Mr. M. G. Anson. Mrs. A. H. Newman took over his duties at Sprowston clinic as a part-time dental officer. Mr. Anson served the authority for nine years and we extend to him our best wishes in his retirement.

Hospital Appointments

September marked the end of the two-year term for Mr. Whitehouse and Mr. Jennings as clinical assistants. Mr. Woonton and Mr. Pearce replaced them in the scheme which continues to be mutually beneficial to both the hospital and staff.

Courses and Conferences

I attended a conference for local authority dental officers at Cheltenham in May and the annual British Dental Association conference at Brighton in June.

Mrs. Croxford and Mr. Gemmell attended a course in Children's Dentistry at the Eastman Dental Hospital, London. Mrs. Wilson attended the general anaesthetic course at the same hospital. In March, two of our dental officers, Mrs. Churchyard and Mr. Pearce, participated in a short intensive course organised at the Norfolk and Norwich Hospital on the subject of crown and bridge work.

The importance of professional staff receiving post-graduate instruction cannot be over-emphasized in these days of rapidly changing techniques and new methods. We have ample evidence of the benefits passed on to patients.

It was felt that practical tuition in mouth-to-mouth respiratory and external cardiac resuscitation would be a valuable contribution to safety in the dental

DENTAL INSPECTIONS AND TREATMENT

ATTENDANCES AND TREATMENT					Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First visit	..	..	..	..	6,893	5,600	981	13,474
Subsequent visits	..	..	..	..	6,591	8,862	1,888	17,341
Total visits	..	..	..	..	13,484	14,462	2,869	30,815
Additional courses of treatment commenced					414	305	49	768
Fillings in permanent teeth	..	..	..	..	4,259	11,726	2,899	18,884
Fillings in deciduous teeth	..	..	..	..	7,690	612	—	8,302
Permanent teeth filled	..	..	..	..	3,622	10,281	2,575	16,478
Deciduous teeth filled	..	..	..	..	7,000	576	—	7,576
Permanent teeth extracted	..	..	..	..	266	1,678	457	2,401
Deciduous teeth extracted	..	..	..	..	6,910	1,788	—	8,698
General anaesthetics	..	..	..	..	1,605	616	74	2,295
Emergencies	..	..	..	..	435	300	66	801

Number of Pupils X-rayed	..	..	..	..	..	..	..	..	436
Prophylaxis	..	..	..	..	..	..	..	..	1,879
Teeth otherwise conserved	..	..	..	..	..	..	..	..	2,954
Number of teeth root filled	..	..	..	..	..	..	..	..	10
Inlays	..	..	..	..	..	..	..	..	3
Crowns	..	..	..	..	..	..	..	..	28
Courses of treatment completed	..	..	..	..	..	..	..	..	11,388

ORTHODONTICS

Cases remaining from previous year	..	..	..	..	..	..	..	..	353
New cases commenced during year	..	..	..	..	..	..	..	..	191
Cases completed during year	..	..	..	..	..	..	..	..	145
Cases discontinued during year	..	..	..	..	..	..	..	..	33
Number of removable appliances fitted	..	..	..	..	..	..	..	..	275
Number of fixed appliances fitted	..	..	..	..	..	..	..	..	—
Pupils referred to Hospital Consultant	..	..	..	..	..	..	..	..	92

PROSTHETICS

Pupils supplied with F.U. or F.L. (first time)	..	..	..	..	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
Pupils supplied with other dentures (first time)	..	..	..	..	—	2	4	6
Number of dentures supplied	..	..	..	..	7	94	55	156
	..	..	..	..	7	98	63	168

ANAESTHETICS

General Anaesthetics administered by Dental Officers	2,280
--	----	----	----	----	----	----	----	----	-------

INSPECTIONS

(a) First inspection at school. Number of Pupils	..	..	..	..	..	..	..	..	38,376
(b) First inspection at clinic. Number of Pupils	..	..	..	..	..	..	..	..	2,761
Number of (a) plus (b) found to require treatment	..	..	..	..	..	..	..	..	22,528
Number of (a) plus (b) offered treatment	..	..	..	..	..	..	..	..	19,841
(c) Pupils re-inspected at school or clinic	..	..	..	..	..	..	..	..	1,663
Number of (c) found to require treatment	..	..	..	..	..	..	..	..	858

SESSIONS

Sessions devoted to treatment	..	..	..	..	..	..	..	..	5,412
Sessions devoted to inspection	..	..	..	..	..	..	..	..	480
Sessions devoted to Dental Health Education	..	..	..	..	..	..	..	..	35

surgery. Consequently, with the help of Mr. T. R. Grimsdick, who is a very experienced instructor in the Norfolk Branch of the British Red Cross Society, classes were held for both dental officers and attendants throughout the county towards the end of the year. These were well received and exercises with a model will take place at annual intervals in the future in order to keep staff familiar with this first aid measure.

Equipment and Clinics

Thirty clinics were in operation, one of which included two surgeries.

It was not possible to finance the provision of any new clinics in the year but the undermentioned new equipment was installed under the modernisation programme:

Aylsham—operating light, aspirator and dental unit.

King's Lynn—aspirator.

Downham Market—airotor.

Sprowston—air compressor.

Cromer—anaesthetic apparatus.

Operating techniques change and improve. Nowadays many dentists work in a sitting position with the patient virtually lying in the dental chair. This is to be applauded as there is far less fatigue for the operator with subsequent benefit to the patient. However, such techniques call for modified equipment and a changing pattern in chairside layout. The introduction of high-powered suction units is an example. These obviate the need for the conventional spittoon. Water, saliva and tooth debris are carried away quickly by these aspirators which do away with the need for periodic rinsing by the patient. However, I would hasten to add that whereas wholesale changes are accepted readily by older patients, young children have to be indoctrinated with infinite care.

General

The county is divided into four areas, viz. Loddon (Mr. S. H. Woonton), North Walsham (Mr. J. L. Taylor), King's Lynn (Mrs. H. M. Croxford) and Swaffham (Mr. N. H. Whitehouse).

Mr. J. L. Taylor in his area report draws attention to the 20% to 30% of the child population who do not receive regular dental attention from any source and he stresses the need for continued dental health education. However, on a brighter note he remarks that 'There is now a very satisfactory degree of co-operation between the schools and our work. Earlier difficulties of two to three years past no longer arise. An increasing number of regular patients are beginning to look upon the dental staff as friends—shown by their co-operation in attending during school holidays and reporting trouble on their own initiative'. This particular area has, of course, had the good fortune of enjoying a constant staff for some years.

Mrs. H. M. Croxford again pleads for improved clinic arrangements in both Terrington and Hunstanton. Both clinics are situated within the school fabric with inherent disadvantages and neither are purpose-built. Like Mr. Taylor, she spotlights the need for educating the public in dental care.

In his Swaffham area report, Mr. N. H. Whitehouse states that 72% of children were inspected in the year. This is an increase of 14% on 1967, partly due to the inclusion of Downham Market which had a high inspection rate but also due to an improvement in East Dereham where the dental officer

concerned has felt the benefit of the ground work carried out in the previous year. Mr. Whitehouse feels that it is possible, in the foreseeable future, to look forward to a situation where every child will receive at least one inspection a year. He points out also that because the dental practitioner situation in Thetford is still critical and the numbers of children are increasing rapidly (12% in 1968) as the town expands, extra staff may be needed in the near future.

Mr. S. H. Woonton comments that 53% of children inspected in his area were found to require treatment. In schools where it was possible to carry out more than one inspection during the year, the figure dropped to 30%. Emergency cases accounted for 4% of attendances. As in the previous year there was a great demand for general anaesthetics in the Diss district. Mr. Woonton and his dental officers administered 682 anaesthetics during the course of the year.

The accompanying statistics show a remarkable resemblance to those of the previous year. It is pleasing to note however that more teeth were conserved in the five to nine age group and the number of inspections continued to increase. A total of 41,137 children were inspected and 55% required treatment.

The hospital consultants again gave us their much valued advice and services and as always I am indebted to the teaching staff in schools together with colleagues in the County Hall for their help and co-operation throughout the year.

VI. HANDICAPPED PUPILS

ASCERTAINMENT

The following table shows the number of formal ascertainments carried out during the year under each specific category. It will be noted that there was an increase of forty-one in the total, mainly due to the number of educationally subnormal children ascertained being more than in the previous year.

	1968	1967
Blind	—	—
Partially sighted	3	3
Deaf	2	2
Partially hearing	20	21
Delicate	16	8
Educationally subnormal	116	86
Epileptic	1	4
Maladjusted	27	31
Physically handicapped	17	11
Defective speech	—	—
Multiple defects	8	3
	<hr/> 210 <hr/>	<hr/> 169 <hr/>

SPECIAL EDUCATIONAL TREATMENT

Many children with less severe physical defects may not need to be admitted to a special school as they are often able, with special help and adjustment of the curriculum, to cope with education within the ordinary school.

The number and disposition of handicapped pupils is shown in the following table:

Categories	In res. day or hospital spl. schools (incl. hostels)		In maintained schools		In independent schools		Not at school		Totals		1968 grand totals	1967 grand totals
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
Blind	1	2	—	—	—	—	—	—	1	2	3	4
Partially Sighted	7	4	3	4	—	—	—	—	10	8	18	16
Deaf	8	5	—	—	1	—	—	—	9	5	14	17
Partially hearing . .	2	1	55	44	4	3	—	—	61	48	109	103
Delicate	10	7	17	12	1	1	—	—	28	20	48	47
E.S.N.	63	42	235	122	2	—	2	1	302	165	467	460
Epileptic	2	—	4	6	—	—	—	—	6	6	12	16
Maladjusted	34	5	17	10	—	—	—	—	51	15	66	76
Physically handicapped	6	8	28	18	5	—	7	3	46	29	75	71
Speech defects	1	1	4	1	—	—	—	—	5	2	7	11
Multiple defects	7	9	7	7	—	—	1	2	15	18	33	25
Totals 1968	141	84	370	224	13	4	10	6	534	318	852	—
1967	144	69	383	218	12	3	11	6	550	296	—	846

The total figure of 852 represents approximately 1.4% of the school population. Some of the special schools used during the year included:

Hamilton Lodge, Brighton	Deaf and partially hearing pupils.
East Anglian School, Gorleston	Deaf and partially sighted pupils.
Lingfield Epileptic Colony	Epileptic pupils.
St. John's School, Brighton	Educationally subnormal pupils.
Parkside Day Special School, Norwich	Educationally subnormal pupils.
Ashley Downs School, Lowestoft	Educationally subnormal pupils.
Wilfred Pickles School, Duddington	Physically handicapped pupils.
Clare Day Special School, Norwich	Physically handicapped pupils.

EDUCATIONALLY SUBNORMAL CHILDREN

The sources of referral and ages at the time of examination of the 116 educationally subnormal children ascertained during the year is shown in the following tables which also give similar information for the previous year.

Analysis of cases ascertained as educationally subnormal during the year.				1968	1967
By whom referred:					
School medical officer . . . . .	..	..	..	69	42
Hospital specialist . . . . .	..	..	..	4	6
Head teacher . . . . .	..	..	..	9	10
Educational psychologist . . . . .	..	..	..	19	12
Speech therapist . . . . .	..	..	..	1	5
Teacher of the deaf . . . . .	..	..	..	—	1
Parent . . . . .	..	..	..	1	—
Ascertained before moving to the county during the year				13	10
				116	86

Analysis of cases ascertained as educationally subnormal during the year (cont.)

Age at time of examination	Special educational treatment at the ordinary school	Admission to special school	Totals 1968	Totals 1967
5	4	1	5	4
6	3	2	5	8
7	12	5	17	19
8	16	9	25	18
9	11	8	19	10
10	9	9	18	9
11	4	7	11	12
12	2	6	8	5
13	1	5	6	1
14	1	1	2	—
Totals	63	53	116	86

SPECIAL SCHOOLS AND HOSTELS PROVIDED BY THE AUTHORITY

(a) Sidestrand Hall for Educationally Subnormal Pupils

On the 31st December, eighty-one pupils were resident and two were attending as day pupils at this school, including two for whom other authorities were financially responsible.

Thirty new admissions took place during 1968, sixteen more than in the previous year, but the continued pressure of demand for the limited places available made the task of assessing priorities difficult. As a matter of routine, all leavers from this special school are examined at home during the last school holiday by a medical officer to assess the need of future care and guidance and to advise on any particular problems. The arrangements continued whereby one of the Committee's dental officers inspects children resident in this special school, any treatment recommended being carried out at the clinic. In addition one of the speech therapists devotes one session per week to giving speech therapy.

(b) Eden Hall, Bacton, for Delicate Pupils

This school provides for children suffering from the undermentioned conditions:

- (i) Debility, malnutrition and anaemia.
- (ii) Respiratory conditions (non-tuberculous).
- (iii) Rheumatism, chorea and rheumatic heart disease.
- (iv) Non-contagious skin disease.
- (v) Congenital heart defect.

The ability to provide for children with more severe handicaps in categories (iii) and (v) is limited by staffing and accommodation. Forty-nine children were resident in the school at the end of the year compared with fifty-three in 1967.

There is a large turnover at this school each year, twenty-six children being discharged and twenty-two admitted in 1968. 73 % of children in residence at the end of the year were boys and asthma remained the most common condition, accounting for 77 % of new admissions during the year.

Medical Classification of Children resident at Eden Hall on 31st December, 1968:

	Boys	Girls	Total
Asthma	23	6	29
Asthma and Eczema	8	2	10
Bronchiectasis	1	1	2
Chorea	—	1	1
General debility	—	3	3
Nervous debility	1	—	1
Rheumatic carditis	1	—	1
Rheumatic fever	1	—	1
Still's disease	1	—	1
	—	—	—
	36	13	49
	—	—	—

Sending Authority

	Boys	Girls	Total
Norfolk	10	9	19
Armagh (Northern Ireland)	1	—	1
Buckinghamshire	1	—	1
Cambridgeshire and Isle of Ely	4	—	4
Essex	6	—	6
Great Yarmouth C.B.	—	1	1
Huntingdonshire and Peterborough	1	—	1
Lincoln C.B.	1	—	1
Lincolnshire (Holland)	1	—	1
Lincolnshire (Kesteven)	2	—	2
Lincolnshire (Lindsey)	—	2	2
London Borough of Bromley	—	1	1
London Borough of Enfield	2	—	2
London Borough of Waltham Forest	1	—	1
Norwich C.B.	1	—	1
Oxfordshire	1	—	1
Suffolk East	1	—	1
Suffolk West	3	—	3
	—	—	—
	36	13	49
	—	—	—

The Senior Medical Officer who keeps in close consultation with the headmaster and matron is responsible for medical approval of admission and discharge. Every term the sending authorities are supplied with brief medical reports. Regular dental inspection is also carried out by one of the Council's dental officers and any necessary treatment is arranged at the clinic.

(c) Colne Cottage Hostel, Cromer, and Morley Hall Hostel, near Wymondham, for Maladjusted Pupils

Provision at these hostels is made for children who show signs of emotional instability or psychological disturbances but who can still benefit from education in an ordinary school providing the sympathetic and sheltered environment of a hostel is available.

Such children are usually seen by a consultant psychiatrist at a child guidance clinic or elsewhere before a recommendation is made for admission and social and educational factors, in addition to medical, must be considered. During the year eleven children were admitted to Morley Hall and twelve children to Colne Cottage. At the end of 1967 thirty-three were resident at Morley Hall and twenty-one at Colne Cottage. Fifteen of these children had been sent by other authorities.

The consultant psychiatrist, senior medical officer, senior educational psychologist, and the psychiatric social worker attended monthly case conferences at each of the hostels with the warden to discuss the progress of individual children, and to make the necessary recommendations and reports.

DEAF AND PARTIALLY HEARING CHILDREN

There was no change in the scheme for the audiometer screening by selected health visitors of six-year-old children.

Children failing the test are followed up by the school medical officer and a full assessment, including ear, nose and throat examination, is carried out before it is decided whether further investigation is required.

During the year 6,234 children had been screened by the health visitor or medical officer and of this number 753 failed the test, approximately 12%. The following gives a summary of the work carried out during the year:

Number of schools visited during year	..	..	384
Number of pupils screened by:			
(a) Health visitors/school nurses	..	..	5,775
(b) School medical officers..	..	..	459
	Total	..	6,234
Number who failed test by:			
(a) Health visitors/school nurses:			
(i) one ear	..	..	401
(ii) both ears	..	..	308
(b) School medical officers:			
(i) one ear	..	..	24
(ii) both ears	..	..	20
	Total	..	753
Number of pupils subsequently examined by school medical officers:			
(a) Found to have no hearing defect, no further action required	..	..	352
(b) Decision deferred pending treatment by general practitioner or school medical officer	..	..	38
(c) Placed under observation by school medical officer	..	..	218
(d) Referred to E.N.T. Clinic (after referral to G.P.)	..	..	102
(e) Recommended for referral to:			
(i) Teacher of the deaf	..	..	1
(ii) Speech therapist	..	..	3
(iii) Educational psychologist	..	..	1
(iv) For mental ascertainment, etc.	..	..	—
	Total	..	715

EDUCATION OF HEARING IMPAIRED CHILDREN

I am indebted to the Chief Education Officer for the following information:

“I am glad to be able to report a further expansion of the facilities provided in the county for hearing impaired children during 1968.

Hearing Assessment Clinics

A very important development has been the opening of a hearing assessment clinic at the Local Health Office, King's Lynn. Clinics have been held at monthly intervals from 13th November, 1968, by Mr. J. S. R. Baxter, Consultant E.N.T. Surgeon at the West Norfolk and King's Lynn Hospital. The clinics at bi-monthly intervals continued to be held at the Jenny Lind Hospital, Norwich, by the Consultant Otologist, Mr. R. J. Sellick. The Acting Senior Teacher of the Deaf, Mr. E. E. Pearson, attended both clinics to assist the otologists, and Mr. R. A. Thomson, Senior Educational Psychologist, and Mr. W. C. P. Lawrence, Educational Psychologist, also attended the clinics and played a full part in the assessment and consideration of appropriate educational facilities for the children who attended. The provision of screening facilities for six-year-old children throughout the county with the resultant early diagnosis of middle ear disorders has reduced the amount of remedial assistance required at the primary level.

Unit Provision

The units established at the following schools continued to provide for the needs of certain hearing impaired children, although, particularly in the case of the units at St. Edmund's and Fakenham County Primary Schools, the emphasis shifted to an increased provision for junior pupils, very few new infant cases having been admitted.

Attleborough County Primary (also serving Attleborough Secondary Modern).

Fakenham County Primary (also serving Fakenham Secondary Modern).

St. Edmund's County Primary Schools, King's Lynn.

Gaywood Park Secondary Modern Schools, King's Lynn.

Thirty-one children were in attendance at the units during the year.

Peripatetic Work

Some 253 hearing impaired children were seen at varying intervals by the teachers of the deaf either in the ordinary schools or in their own homes. Visits were also made to seven children attending independent schools in the county.

Pre-School Cases

Thirty-seven children of under school age were seen at their homes by the teachers of the deaf, it being of considerable importance when children are found to have hearing difficulties to provide auditory training for them at as early an age as possible.

Special Schools

At the end of the year twenty-one deaf and partially hearing children were accommodated at residential special schools as follows:

East Anglian School, Gorleston	..	..	..	..	13
Tewin Water, Herts.	..	..	..	..	2
Rayner's School, Penn, Bucks.	..	..	..	..	1
Woodford School for the Deaf	..	..	..	..	1
Hamilton Lodge School, Brighton	..	..	..	..	3
Mary Hare Grammar, Newbury, Berks.	..	..	..	..	1

New Cases

The number of new cases reported during the year was 112.

Hearing Aids

At 31st December, 1968, there were 144 hearing impaired children, seen by the teachers of the deaf, who had been provided with hearing aids.

Training of Teachers

Mrs. A. E. Pearson, who had been seconded to London University, gained her Diploma in the teaching of deaf and partially hearing children and returned to take up duty in West Norfolk and at the Fakenham County Primary School Unit at the end of the Summer Term.

The Senior Teacher of the Deaf, Miss P. J. Webber, was granted leave of absence to attend a year's course from October, 1968, at Manchester University leading to the Diploma in Audiology, and Mrs. V. E. Coles was seconded to London University from September to take the course of training leading to the Diploma in the teaching of deaf and partially hearing children.

Staff Appointments

Mr. R. A. Beeson commenced duty in September as teacher in charge of the unit provision at Attleborough for children attending the County Primary and Secondary Modern Schools, and at the end of the year we had appointed Mrs. J. M. Dolby to undertake peripatetic work in south-west Norfolk and to assist at the Attleborough Schools from January, 1969."

CHILD GUIDANCE

There were no major changes in the number of psychiatrists available for consultation at the child guidance clinics during the year. Dr. I. N. S. Heald, Consultant Psychiatrist, with a panel of three other consultants, continued to attend. During the year the child guidance team was strengthened by the appointment of an additional social worker. The senior medical officer continued to consult as necessary with members of the team.

The total number of new cases (183) showed a slight increase over the figures for the preceding year and includes nineteen enuretics who were seen at nine special clinics held in Norwich.

The number of children seen and the number of sessions held during the year at five clinics are given below:

No. of clinic sessions held	No. of new cases seen	Total individual patients seen	Total No. of interviews
126 (146)	183 (178)	232 (226)	281 (318)

(Comparable figures for 1967 are shown in brackets)

Although fewer clinic sessions were held, the numbers of new cases and recalls seen at the clinics rose slightly, indicating a greater measure of response from the parents. There was an increase in the proportion of cases referred by general practitioners, i.e., from 36% in 1967 to 40% in 1968.

The numbers of clinic sessions and interviews which took place during the year at each centre are analysed in the following table:

		Norwich	King's Lynn	Cromer	Fakenham	Great Yarmouth	Total
No. of sessions	..	77*	44	3	2	—	126
No. of interviews	..	170	93	6	5	7	281

*Includes eleven sessions for enuretics.

Results following Diagnosis and Treatment

Thirty-four (14%) of all children seen at child guidance clinics during the year or in previous years were discharged as adjusted or greatly improved. Included in the 128 cases still under treatment are those children who are being seen from time to time by either the educational psychologist or the social worker and cannot therefore be regarded as formally discharged from the clinic.

ANALYSIS OF NEW CASES REFERRED

Sources of referral:	No.	%	
General medical practitioners	74	40	
Hospital specialists	10	5	
School medical staff, speech therapists, local welfare officers and health visitors	40	22	
Chief Education Officer, educational psychologists, social workers and head teachers of schools	39	22	
Children's Officer or Inspector N.S.P.C.C.	9	5	
Probation officers or magistrates	5	6	
Parents	6		
	183	100	
Reasons for referral:			
General behaviour problems	59		
Emotional problems	50		
Educational difficulties (including refusal or reluctance to attend school) caused by psychological disturbances, also advice re educational future	43		
Incontinence of urine or faeces	31		
	183		
Disposal of cases:			
The figures in brackets indicate the number of children who originally attended in previous years.			
Discharged as adjusted or greatly improved ..	No. 34	% 14	(16)
Recommended for admission to hostel for maladjusted children	20	10	(7)
Recommended for admission to residential special school for educationally subnormal children	4	7	
Recommended for admission to residential special school for delicate children	4		(1)
Recommended for admission to mental hospital	2		(2)
Recommended for admission to Junior Training Centre	1		
Recommended for admission to approved school	1		
Referred to Children's Officer or probation officer	2		
Parents unco-operative	1		
Left County	1		
Advice given—no recall to clinic necessary ..	34	14	
Still under treatment—including follow up by the educational psychologist or social worker	128	55	(22)
	232	100	(49)

SPEECH THERAPY

At the beginning of 1968 the vacant post of speech therapist was filled and therefore the establishment was complete for the whole of the year. It was consequently possible to re-open or increase the frequency of several clinics and the number of pupils treated during the year increased from 894 to 1,005.

Difficulties in travelling, particularly in rural areas, continued to make it impossible to arrange treatment for all cases but, where practicable, arrangements were made for speech therapists to visit the child's home or school.

The table on page 24a shows in detail the work carried out during the year but does not include the number of cases seen by Miss Rutt, senior speech therapist, at the Great Yarmouth Clinic and the Jenny Lind Hospital where she attends by arrangement with the appropriate authorities.

PUPILS SUFFERING FROM DISABILITY OF THE MIND

During the year two children were examined in accordance with Section 57 of the Education Act, 1944. In one of these cases an appeal by the parents was upheld by the Department of Education and Science.

Forty-five children were found during the year to be unsuitable for education at school and these were dealt with informally as the parents were in agreement with the medical officer's opinion. Of these children, thirty-eight were admitted to junior training centres, four were under consideration for such centres and one was still not suitable for attendance. One of the children was admitted to a special care unit in a training centre and the remaining case was awaiting admission to a hospital for the subnormal.

Forty-five children were reported informally to the local health authority as requiring care and guidance after leaving school.

CEREBRAL PALSY

At the 31st December, forty-five spastic children were known to the school health service, of whom eleven were at residential special schools, nineteen at ordinary schools, two were having home tuition and the remaining thirteen were either of pre-school age or not attending school.

HOME TUITION

The Education Committee, at the end of the year, were providing home tuition for twenty-one handicapped pupils.

HEART CLINICS

Special heart clinics for Norfolk children were held by Dr. W. A. Oliver at the Jenny Lind Hospital, Norwich, and during the year ninety-one examinations were made. Older children were seen by him at the Norfolk and Norwich Hospital where forty-nine examinations took place during the year.

VII. INFECTIOUS DISEASES

Two schools only were closed during the year for a total of two-and-a-half school days, because of virus enteritis.

SPEECH THERAPY

Statistics for Year ended 31st December, 1968

TREATMENT AT CLINICS	Acle	Attleborough	Aylsham	Burnham Market	Caister	Clenchwarton	Cromer	Dereham	Diss	Downham Market	Fakenham	*Hellesdon (Kinsale Avenue)	Hunstanton area	King's Lynn	Loddon	*Long Stratton	Marham	Methwold	North Walsham	Norwich	*Old Buckenham	*Reepham	†Sculthorpe (R.A.F.)	Sheringham	Sidestrand Hall	Stalham	*Swaffham area	†Swanton Morley	Thetford	Tilney Area	Watton	Wells	Wymondham	Treated at Home/School	GRAND TOTAL
Total number of sessions held	38	36	36	44	34	12	46	84	36	41	88	38	110	140	38	37	11	11	72	218	34	29	35	46	31	37	19	32	70	27	65	47	74	—	1,716
Total number of cases: Treated during the year	10	21	8	15	14	6	15	65	25	44	34	21	35	122	27	18	19	18	33	150	21	9	9	24	15	7	8	18	60	18	41	9	44	22	1,005
Commenced treatment during year	4	2	3	2	6	—	5	33	4	14	11	5	7	33	8	8	6	6	10	64	7	4	4	9	6	3	3	6	25	1	11	2	7	12	331
Discharged	3	7	1	4	6	1	4	21	12	18	16	3	8	45	11	9	7	10	13	36	8	4	5	9	4	2	—	9	18	1	12	3	13	4	327
Transferred to other clinics or home visits ..	—	1	1	—	—	—	1	1	—	—	2	—	1	1	—	—	1	—	1	8	1	—	—	—	—	—	—	—	2	—	—	1	—	1	23
Analysis of all cases treated during year:																																			
1. Articulation Disorders																																			
Dyslalia and Dysarthria																																			
(a) Simple	1	—	3	1	5	3	1	20	—	31	8	—	24	77	1	1	17	13	11	48	1	3	1	6	6	4	—	8	18	15	11	2	4	4	348
(b) Multiple	1	15	4	5	4	1	5	12	15	—	9	14	—	3	16	10	—	—	6	46	8	—	3	5	1	—	2	7	9	1	11	3	25	5	246
2. Language Disorders	2	—	—	—	3	—	—	9	—	—	—	2	1	—	2	—	—	—	—	11	1	—	—	—	1	—	1	1	3	—	5	—	1	6	49
3. Stammering	—	1	—	—	1	1	1	2	3	7	4	3	4	14	4	2	1	4	4	10	4	5	1	2	1	—	—	—	5	—	1	1	5	3	94
4. Vocal Disorders (including those of resonance)	—	—	—	2	—	—	1	—	—	1	1	—	4	10	—	—	—	1	—	3	1	—	—	—	—	—	—	—	3	—	4	—	—	—	31
5. Articulation and Language Disorders ..	5	4	1	6	—	1	6	17	1	1	12	1	—	5	3	2	1	—	10	19	5	—	3	9	4	3	4	1	17	1	7	1	5	3	158
6. Other Combinations																																			
(a) Without Stammer	—	—	—	—	—	—	—	1	1	3	—	—	1	11	—	2	—	—	—	7	—	—	—	—	—	—	—	—	2	1	2	—	1	1	33
(b) With Stammer	1	1	—	1	1	—	1	4	5	1	—	1	1	2	1	1	—	—	2	6	1	1	1	2	2	—	1	1	3	—	—	2	3	—	46
Analysis of cases discharged:																																			
Number of children discharged during year who achieved normal speech	2	6	1	4	4	1	3	2	7	5	14	1	4	26	5	4	5	9	10	15	3	2	2	6	2	2	—	2	1	1	1	1	8	1	160
Were greatly improved	1	—	—	—	1	—	—	11	4	8	—	2	4	9	3	2	2	1	1	11	3	1	—	—	—	—	—	4	8	—	4	—	3	1	84
Showed some improvement	—	1	1	—	—	—	2	5	1	1	3	—	1	2	1	—	—	—	1	13	2	1	3	3	2	—	—	—	5	—	3	—	1	2	54
Showed little or no improvement	—	1	—	—	1	—	—	1	—	1	—	—	—	2	2	1	—	—	2	2	1	—	—	—	—	—	—	1	1	—	3	2	—	—	21
Interview only	—	—	—	—	—	—	—	3	—	3	1	—	—	7	—	2	1	—	—	3	—	—	—	—	—	—	—	2	5	—	1	1	1	1	31
Number of cases discharged during year:																																		Total	350
No further treatment required	3	6	1	4	5	1	3	15	10	12	14	2	6	36	7	5	6	9	10	27	4	3	2	6	2	2	—	4	10	1	4	1	11	3	235
Non co-operation of parents	—	—	—	—	—	—	—	2	1	—	—	—	—	1	—	1	—	—	2	—	1	—	—	3	—	—	—	—	2	—	—	1	1	—	15
Left district	—	1	—	—	—	—	—	2	1	4	1	1	2	5	3	1	—	1	1	5	1	—	2	—	—	—	—	3	2	—	5	1	1	—	43
Left school (over age)	—	—	—	—	—	—	—	—	—	1	1	—	—	2	1	2	—	—	—	3	2	1	1	—	2	—	—	—	—	—	—	—	—	1	17
Unsuitable for speech therapy	—	—	—	—	1	—	1	2	—	1	—	—	—	1	—	—	1	—	—	1	—	—	—	—	—	—	—	2	4	—	3	—	—	—	17
Transferred to other clinics	—	1	1	—	—	—	1	1	—	—	2	—	1	1	—	—	1	—	1	8	1	—	—	—	—	—	—	—	2	—	—	1	—	1	23
																																		Total	350

*Clinic reopened during the year

†New clinic opened during the year

VIII. VACCINATION AND IMMUNISATION

Vaccination against Smallpox

There was a slight decrease in the number of school children who were vaccinated in 1968 as shown in the comparative figures for the last three years.

				Primary Vaccination	Re-vaccination
1966	..	..	..	283	411
1967	..	..	..	312	468
1968	..	..	..	267	426

Diphtheria Immunisation

A further decrease is reported in primary immunisation of children aged between four and fifteen years but the number of booster injections remained at a comparatively high level. The diphtheria immunity index has however shown a steady annual rise over the last ten years and stands at 80.9 % compared to a mere 40 % in 1959.

					Primary	Booster
1966	..	..	..	..	558	6,583
1967	..	..	..	..	540	6,293
1968	..	..	..	..	262	6,167

There were no reported cases of diphtheria during the year.

Immunisation against Tetanus

Protection against tetanus is offered to all children at school entry either by a primary course or a re-inforcing injection with a further booster injection at fifteen years of age or on leaving school. Primary immunisation was given to 633 children between the ages of four and fifteen years and, in addition, 8,429 received a booster dose.

Immunisation against Poliomyelitis

Primary immunisation with oral vaccine decreased slightly in 1968 with a total of 326 children of school age compared to 560 in 1967 but booster doses were maintained at a steady level, 4,527 being given compared to the 1967 figure of 4,426.

Immunisation against Measles

Protection against this disease was introduced for the first time in May, 1968, and was offered at the outset to susceptible children (i.e., those who have not had a natural attack of measles) between the ages of four to seven years and later, in July, to all children up to the age of fifteen years. Immunisation consisted of a single injection and this was given to a total of 5,092 children between the ages of four to fifteen years.

B.C.G. Vaccination

There was no change in the administration of the Council's scheme but the numbers of school children vaccinated fell below the normal expectation of those eligible. Unfortunately the non-delivery at the last moment of further instruments ordered for needleless injection of B.C.G. vaccine resulted in the postponement of vaccination in three areas to the beginning of 1969 when arrangements were made for the remaining children who were eligible in 1968 to be vaccinated by the needle and syringe method. During 1968, 2,575 school children were skin tested and of the 2,225 found to be suitable for vaccination, 2,201 were given the B.C.G. vaccine.

IX. SANITARY CIRCUMSTANCES AT SCHOOLS

During the year 160 sanitary survey reports were completed by school medical officers when carrying out routine medical inspections at schools and this number represents approximately 31% of the schools in the county. In eight of the forty-three school areas no survey reports were completed and in ten areas the number of such reports completed was below 25% of the total number of schools in the area.

Of the completed reports 100 contained no adverse comments and the following list summarises briefly the nature of those features concerning which the school medical officers felt that some improvement was desirable at the remaining sixty schools surveyed.

Analysis of Unfavourable Comments by School Medical Officers, 1968

Features	No. of Schools at which reported	Recommendations made
Closet accommodation	27	1
Washing accommodation	16	—
Water supply	3	—
Lighting and Ventilation	10	2
Heating	8	—
General	6	—
Playground	5	—
Refuse Disposal	3	—
Drainage	4	—
Canteen	9	1
Miscellaneous	6	2

Some of the features listed relate to inadequacies in the number of facilities provided and resultant non-compliance with the Standards for School Premises Regulations, 1959. In many cases compliance with these regulations would necessitate new building and it is regrettable that the very severe capital restriction on the Education Committee's minor building programme precludes this. Often it is almost impossible to ensure adequate hygiene control and the position at a number of schools has only been slightly eased by the installation of hot water supplies. The recommendations from this department relate only to those schools where it was felt there was considerable need for improvement and throughout the year close liaison was maintained with the Education Department.

X. SCHOOL MEALS SERVICE

The county public health inspectors have continued routine inspections at school canteens and the department has aimed at the completion of one such inspection per school in each term. 707 visits were completed during the year and in twenty-six canteens improvements which were considered necessary to meet the requirements of the Food Hygiene Regulations were obtained with the co-operation of the Education Department.

Food hygiene talks were continued during the year at special courses for school meals staff.

The standard of food preparation at the canteens remained high and no cases of food poisoning attributable to school meals were found. This is the more commendable since it is still necessary at a number of schools for classrooms to be used for school meals and many schools are supplied with meals in containers which require efficient cleansing and sterilising.

The department has welcomed the excellent co-operation received from the head teachers and all staff of the school meals service during the year.

In the course of inspections by the county public health inspectors, food-stuffs found to be unfit for human consumption were condemned and suitable liaison was maintained as necessary with the public health inspectors of the respective district councils.

XI. MILK IN SCHOOLS SCHEME

During the year all schools were in receipt of a bottled pasteurised milk supply but as from the beginning of the Autumn term milk was no longer supplied to secondary schools. The following table shows the results of the examination of samples taken at the schools. Void methylene blue results were reported because of the atmospheric shade temperature exceeding 70°F during the period of storage of the samples at the laboratory.

Test	No. of examinations	Satisfactory	Unsatisfactory	Void
Methylene Blue	.. 369	320	13	36
Phosphatase ..	.. 369	367	2	—
	<hr/> 738	<hr/> 687	<hr/> 15	<hr/> 36

School milk sampling complements the statutory sampling carried out under the Milk (Special Designations) Regulations, 1963, and where necessary in the case of failing samples, advice was given at the schools to improve the handling of the milk between the times of its delivery and consumption and investigations were made at the dairies for faults in the processing, storage and distribution arrangements.

329 samples of schools milk were submitted to the Weights and Measures Department of the County Council for Gerber examination. One proved unsatisfactory and suitable follow-up action was taken.

During the year efforts were made to ensure the prompt return of school milk bottles to the dairymen who co-operated particularly in their collection at the end of each term. This avoided difficulties in adequately cleansing and sterilising bottles containing stale milk and which could otherwise have become grossly contaminated. Whilst many schools rinse the bottles after use it is regretted that a large number have yet to be persuaded so to do.

XII. SCHOOL SWIMMING POOLS

Of the thirty-four school swimming pools in use during the year nine were covered and heated and all but one were fitted with continuous circulation, filtration and chlorination equipment. Seven new pools were either projected or under construction at the end of the year and the county public health inspector continued the practice of early discussions with the head teachers and others concerned with the administration of the pools to ensure a satisfactory standard of water purity. There is a fairly wide variation in the types of pool in the county and in the methods of purification employed. The fact that, in general, a high standard has been maintained is due largely to the enthusiasm and close co-operation of the head teachers and caretakers at the schools.

Inspections and sampling of the pools have been carried out by the county public health inspector during the year and of eighty-two samples submitted

sixty-eight contained no coliform organisms per 100 ml and thirty-seven had nil plate count tests. Continued failing samples at one heavily-used indoor heated pool resulted in its temporary closure pending investigations to trace the fault. A heavy deposit of calcium and lime was found to be almost totally obstructing a bend in the inlet pipe to the pool. This was cleared and subsequent samples proved satisfactory.

XIII REMAND HOME

The arrangements for visiting Bramerton Remand Home by members of the headquarters medical staff were continued during the year. 200 boys and 101 girls were admitted. Twenty-seven girls were specially examined. The consultant psychiatrists saw 106 boys and thirty-four girls.

The Norwich City Authority continued to make arrangements for children from its area to be seen by an alternative psychiatrist.

XIV. CHILDREN'S HOMES

All seven children's homes maintained by the Children's Committee were inspected regularly by medical officers and reports submitted on the hygienic conditions of the premises.

Children needing dental treatment were, where practicable, treated at appropriate clinics.

XV. MISCELLANEOUS

Holiday Camps for Handicapped Children

Arrangements were again made for suitable cases to have a holiday. Two epileptic children, two diabetic children and one physically handicapped child each had a two week holiday arranged by the appropriate voluntary association. The committee accepted responsibility for the fees and travelling expenses involved.

Medical Examinations

The following examinations were made by the medical staff of the health department:

436 examinations of candidates for teachers' training colleges and entrants to the teaching profession, under the terms of Circular 248 and 249 of the Department of Education and Science.

271 examinations of entrants to the school canteen service, other than those covered by the Local Government Superannuation Acts.

Forty examinations of school road crossing patrols (non-superannuable).

SCHOOL HEALTH SERVICE

LIST OF CLINICS

as at 31st December, 1968

Name and address of clinic	Type of treatment provided	Frequency of sessions
ACLE		
V.P. School	Speech therapy Dental	One session weekly Four sessions weekly
ATTLEBOROUGH		
Secondary Modern School..	Speech therapy Dental	One session weekly Five sessions weekly
AYLSHAM		
Secondary Modern School..	Speech therapy Dental	One session weekly Four sessions weekly
BURNHAM MARKET		
C.P. School	Speech therapy	One session weekly
CAISTER		
Secondary Modern School..	Speech therapy } C.P. School } Speech therapy }	One session weekly
COSTESSEY		
C.P. School	Dental	Five sessions weekly
CROMER		
Local Health Office, Norwich Road	Child guidance Dental Speech therapy	As required Four sessions weekly One session weekly
DISS		
Secondary Modern School..	Dental Speech therapy	Eight sessions weekly One session weekly
DOWNHAM MARKET		
Local Health Office, 48 Howdale Road	Dental Speech therapy	Six sessions weekly As required
EAST DEREHAM		
Local Health Office, High Street	Dental Speech therapy	Six sessions weekly One session weekly
FAKENHAM		
Local Health Office, Baron's Close	Child Guidance Dental Speech therapy	As required Six sessions weekly Two sessions weekly
FRAMINGHAM EARL		
Secondary Modern School..	Dental	Four sessions weekly
HELLESDON		
C.P. Infants' School, Kinsale Avenue	Dental Speech Therapy	Four sessions weekly One session weekly

Name and address of clinic	Type of treatment provided	Frequency of sessions
HOVETON Secondary Modern School..	Dental	Two sessions weekly
KING'S LYNN Local Health Office, 15 Nelson Street	Child guidance Speech therapy	Two sessions weekly Three sessions weekly
Secondary Modern School, Queen Mary Road, Gaywood (two surgeries)	Dental	Twenty sessions weekly
LODDON Secondary Modern School..	Dental Speech therapy	Two sessions weekly One session weekly
LONG STRATTON Secondary Modern School..	Dental Speech Therapy	Two sessions weekly One session weekly
METHWOLD Secondary Modern School..	Dental	Five sessions weekly
NEW HUNSTANTON Secondary Modern School..	Dental Speech therapy	Eight sessions weekly One session weekly
NORTH WALSHAM Secondary Modern School..	Dental Speech therapy	Four sessions weekly Two sessions weekly
NORWICH 52 Thorpe Road	Child guidance	One session weekly, and one session monthly (enuretics)
	Speech therapy	Four sessions weekly
Local Health Office, Aspland Road	Dental	One session weekly
OLD BUCKENHAM Secondary Modern School..	Speech therapy	One session weekly
REEPHAM Secondary Modern School..	Dental Speech therapy	Four sessions weekly One session weekly
SCULTHORPE Airfield C.P. School ..	Speech therapy	One session weekly
SHERINGHAM Secondary Modern School..	Dental Speech therapy	Two sessions weekly One session weekly
SPROWSTON C.P. School	Dental	Four sessions weekly
STALHAM Secondary Modern School..	Dental Speech therapy	Two sessions weekly One session weekly
SWAFFHAM Secondary Modern School..	Dental	Six sessions weekly

Name and address of clinic	Type of treatment provided	Frequency of sessions
SWANTON MORLEY C.P. School	Speech therapy	One session weekly
TERRINGTON ST. CLEMENT Secondary Modern School..	Dental	Two sessions weekly
THETFORD Local Health Office,	Dental	Five sessions weekly
Tanner Street	Speech therapy	Two sessions weekly
Queensway C.P. School ..	Speech therapy	
THORPE C.P. School, Hillside Avenue	Dental	Four sessions weekly
WATTON Secondary Modern School..	Dental	Four sessions weekly
	Speech therapy	One session weekly
C.P. School	Speech therapy	One session weekly
WELLS-NEXT-SEA C.P. School	Dental	Four sessions weekly
	Speech therapy	One session weekly
WYMONDHAM Secondary Modern Boys' School	Dental	Five sessions weekly
Secondary Modern Girls' School	Speech therapy	Two sessions weekly

MEDICAL INSPECTION AND TREATMENT (Excluding Dental Inspection and Treatment)

Return for the Year ended 31st December, 1968

PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A—PERIODIC MEDICAL INSPECTIONS

Age Groups inspected (By year of Birth)	No. of Pupils who have received a full medical examination	PHYSICAL CONDITION OF PUPILS INSPECTED		Pupils found to require treatment (excluding dental diseases and infestation with vermin)	
		Satisfactory	Unsatisfactory	For defective vision (excluding squint)	For any other condition recorded at Part II
(1)	(2)	(3)	(4)	(5)	(6)
1964 and later					
1963	393	391	2	10	30
1962	3,356	3,355	1	69	234
1961	2,544	2,539	5	62	212
1960	413	412	1	22	46
1959	311	311	—	19	17
1958	288	288	—	22	25
1957	2,023	2,019	4	141	127
1956	2,455	2,448	7	184	163
1955	651	650	1	35	61
1954	326	326	—	32	36
1953 and earlier	1,084	1,082	2	76	60
	3,394	3,393	1	415	180
Total	17,238	17,214	24	1,087	1,191
					2,122

Col. (3) total as a percentage of Col. (2) total 99.86%—
Col. (4) total as a percentage of Col. (2) total 0.14%—

TABLE B—OTHER INSPECTIONS

NOTES: A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections	..	..	..	1,092
Number of re-inspections	..	..	..	8,013
				<hr/>
	Total	..	..	9,105
				<hr/>

TABLE C—INFESTATION WITH VERMIN

(a)	Total number of individual examinations of pupils in schools by school nurses or other authorised persons	..	..	..	24,450
(b)	Total number of individual pupils found to be infested	..			102
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	..			—
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	..	..		—

**PART II—DEFECTS FOUND BY PERIODIC AND SPECIAL
MEDICAL INSPECTIONS DURING THE YEAR**

Defect Code No.	Defect or Disease					PERIODIC INSPECTIONS				Special Inspection
						Entrants	Leavers	Others	Total	
4.	Skin	T	O			40	40	40	120	18
						139	80	81	300	18
5.	Eyes—(a) Vision	T	O			200	459	428	1,087	293
		O				446	266	346	1,058	137
	(b) Squint	T	O			79	5	34	118	21
		O				94	11	19	124	4
	(c) Other	T	O			10	5	11	26	4
		O				28	57	61	146	11
6.	Ears—(a) Hearing	T	O			45	8	35	88	51
		O				204	19	62	285	68
	(b) Otitis Media	T	O			16	5	4	25	11
		O				132	11	13	156	6
	(c) Other	T	O			9	4	5	18	9
		O				24	4	5	33	3
7.	Nose and Throat	T	O			79	19	40	138	73
		O				655	51	141	847	60
8.	Speech	T	O			52	4	27	83	36
		O				364	11	29	404	19
9.	Lymphatic Glands	T	O			4	—	—	4	2
		O				55	1	9	65	3
10.	Heart	T	O			19	10	10	39	4
		O				79	21	24	124	2
11.	Lungs	T	O			17	7	51	75	18
		O				187	31	61	279	40
12.	Developmental—(a) Hernia	T	O			9	4	6	19	4
		O				30	2	6	38	2
	(b) Other	T	O			22	4	38	64	20
		O				288	24	156	468	23
13.	Orthopaedic—(a) Posture	T	O			3	2	5	10	3
		O				31	20	30	81	—
	(b) Feet	T	O			67	10	25	102	21
		O				227	36	102	365	18
	(c) Other	T	O			52	19	26	97	27
		O				157	32	54	243	20
14.	Nervous System—(a) Epilepsy	T	O			8	—	7	15	4
		O				6	4	7	17	4
	(b) Other	T	O			6	2	10	18	9
		O				43	8	19	70	10
15.	Psychological—(a) Development	T	O			6	2	101	109	35
		O				117	30	91	238	25
	(b) Stability	T	O			12	16	15	43	30
		O				156	19	53	228	47
16.	Abdomen	T	O			4	1	4	9	—
		O				37	7	15	59	6
17.	Other	T	O			31	10	33	74	15
		O				119	72	139	330	35
	TOTALS	T	O			790	636	955	2,381	708
		O				3,618	817	1,523	5,958	561

**PART III—TREATMENT OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY
AND SPECIAL SCHOOLS)**

TABLE A—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	23
Errors of refraction (including squint)	2,049
Total	2,072
Number of pupils for whom spectacles were prescribed	997

TABLE B—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	38
(b) for adenoids and chronic tonsilli- tis	435
(c) for other nose and throat condi- tions	29
Received other forms of treatment ..	8
Total	510
Total number of pupils still on the register of schools at 31st December, 1968, known to have been provided with hearing aids:	
(a) during the calendar year 1968..	13
(b) in previous years	53

TABLE C—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number known to have been treated
(a) Pupils treated at clinics or out- patients departments	*
(b) Pupils treated at school for postural defects	*
Total	*

*Figures not available

TABLE D—DISEASES OF THE SKIN
(excluding uncleanness, for which see Table C of Part 1)

	Number of pupils known to have been treated
Ringworm—(a) Scalp	—
(b) Body.. ..	—
Scabies	8
Impetigo	12
Other skin diseases	2
Total	22

TABLE E—CHILD GUIDANCE TREATMENT

	Number of pupils known to have been treated
Pupils treated at Child Guidance clinics	232

TABLE F—SPEECH THERAPY

	Number known to have been treated
Pupils treated by speech therapists ..	1,005

TABLE G—OTHER TREATMENT GIVEN

	Number of cases known to have been treated
(a) Pupils with minor ailments ..	—
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	2,201
(d) Other	37*
Total	2,238

Children of school age, contacts of persons suffering from tuberculosis
vaccinated by Chest Physicians



